

## ABSTRACT CHECKLIST

BRFSS Annual Conference  
Scottsdale, Arizona  
February 9—12, 2004

Attach a completed copy of this checklist to each abstract submission.

**1. ☐ Abstract is 250 words or less and follows other guidelines**

**2. ☐ Presenting Author's Identification:**

Name: \_\_\_\_\_

Organization: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Telephone number: \_\_\_\_\_

Fax number: \_\_\_\_\_

**3. Select the topic that best corresponds to your abstract:**

☐ A. Survey Operations or Methodology

☐ B. Lessons Learned

☐ C. Program Planning and Health Promotion

☐ D. Epidemiologic Studies

**4. Choose preferred type of presentation:**

☐ Oral Presentation

(If Oral Presentation slot is not available, a poster presentation is

☐ acceptable

☐ not acceptable)

☐ Poster

**5. Specify audio/visual requirements:**

☐ Proxima (LCD projector)

☐ Overhead Projector

☐ Other (please specify):

**ABSTRACT DEADLINE IS 5 p.m., EST, NOVEMBER 7, 2003**

## **Submission**

Please submit abstract and completed checklist via e-mail or on diskette in Word Perfect or Word format to Nicole Flowers via any of the following methods. Paper copies will not be accepted.

### **E-mail:**

[ndf0@cdc.gov](mailto:ndf0@cdc.gov)

### **Postal mail:**

Nicole Flowers, M.D., M.P.H.  
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### **Overnight parcel service, such as UPS or FedEx:**

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